## National Park Service Casa Grande Ruins National Monument 1100 W. Ruins Drive, Coolidge, AZ 85128 (520) 723-3172



## Application for Special Use Permit Commercial Filming/Still Photography

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information**. A nonrefundable processing fee of \$200.00 must accompany this application unless the requested use is an exercise of a First Amendment right. You must allow sufficient time for the park to process your request; check with the park for guidelines. You will be notified of the status of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges and proof of liability insurance naming the United States of America as also insured.

Enter eith	ner a social security num	ber OR a tax	ID numbe	er: we do not red	uire both.		
Applicant Name:		Applic	Applicant Company:				
Social Security #:			Tax ID	Tax ID #:			
Street/Address:			Street	Street/Address:			
City/State/Zip Code:			City/S	City/State/Zip Code:			
Telephone #:			Conta	Contact name:			
Cell phone #:			Telep	Telephone #:			
Fax #:			Fax #	Fax #:			
Email:		Email	Email:				
Project name:			Telep	Telephone #:			
Location manager			Cell p	Cell phone #:			
			E-mai	E-mail:			
TYPE OF PROJECT: □ Still photography □ video/motion picture/film  Detailed description of onsite activities (attach additional pages as necessary):							
LOCATION SCHEDULE  Each date and each location must have an individual entry – use additional pages as necessary.  Date Location Start Time End Interior/ Activity: Set-Up/ # of Cast & Crew*							
			Tille	Exterior	Filming /Breakdown	Clew	

<sup>\*</sup> number in this column should include all individuals present at the location

	backdrops, sets, props (attach additi uded: weapons, animals, minors, nuc		v). Please note if any
Number of Vehicles: Car, SUV or light truck	Vehicles greater than a 1	0,000 lbs. (class 3 or hi	gher)
Have you physically visited Do you plan on advertising	□Y □N □Y □N		
When answering yes to	any of the following questions, pro	ovide additional inforn	nation:
Do you have, or are you a agency for this acti Have you had previous pe Have you ever been denied Have you forfeited a bond Are there any pending Fedinvolved a commer Do you anticipate any section.	□Y       □N         □Y       □N         □Y       □N         □Y       □N         □Y       □N         □Y       □N		
CONTACTS:			
	onsible for adherence to all terms		ermit:
Name:	Title:		
Phone: Ce	Il Phone:		
	signature certifies that all the information or false statements have been gi		nd correct, and that no
Signature:	Print Name:	Date:	
Title:	Company Name: _		
*****	*************	*******	***

**Note:** this is an application only, and does not serve as permission to conduct any special activity in the park. The information provided will be used to determine whether a permit will be issued. Send the completed application along with the application fee in the form of a credit card, cashier's check, money order or personal check made payable to **National Park Service** to Superintendent Karl Cordova at the Park address found on the first page of this application.

If your request is approved, a permit containing applicable terms and conditions will be sent to you. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent before the permitted activity may begin.

**Notice to Customers Making Payment by Personal Check:** When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

## **NOTICES**

**Privacy Act Statement:** The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required by this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees and charges by the National Park Service (31 U.S.C. 7701). Information from the application may be transferred to appropriate Federal, State, and local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

Paperwork Reduction Act Statement: We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide the park managers the information needed to decide whether or not to allow the requested use. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 15 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the Information Collection Clearance Officer, National Park Service, 1849 C Street NW (1237), Washington, D.C. 20240.

Title 18 U.S.C. Section 1001 makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any mater within its jurisdiction.